

NOTE 12, Page 25.—“ *Where the predisposition exists, it is of no consequence to the future progeny, whether the disease has been excited or not.*”

If the reader is willing to admit so fair an inference from facts which are daily passing before him, and from what I have stated relative to gout, he will see the impropriety of that passage in Fernelius, so often quoted by subsequent writers, “ *Senes et validinarii imbecilles filios vitiosa constitutione gignunt.*” What a gloomy prospect of life would such an opinion afford us! what moral restraints would it not impose! how much beyond what can be expected in the human constitution, and how unnecessary! Because weak children are sometimes the offspring of aged parents, we are apt hastily to forget how often the same event occurs to parents in the vigour of life. The instances are innumerable, in which the younger branch of a family has revived its splendor, which had been decaying for a succession of ages. The late Mr. Pitt was the youngest son, born when his illustrious father was 51 years of age. I think I have heard, that the great and venerable Pratt was the son of a much more aged parent.

NOTE 13, Page 26.—“ *Madness as well as gout, is never hereditary but in susceptibility; and those who have paid the greatest attention to the subject, must admit the two degrees of susceptibility.*”

Cases of very early insanity are recorded, but they appear to me, rather to come under the description of mental imbecility. This leads to one of the most difficult questions in physics; and the more so, as it is

scarcely possible to divest it of metaphysics ; I mean a definition of madness. The great difficulty, however, in this, as in every other pathological inquiry, seems to arise from our attempting too much. The shades of madness are so various, that few of us can be said to be at all times free from it ; and of this we are so sensible, that we perpetually accuse others, and even ourselves, of acting under the impression of madness. We must also admit, that there are few madmen who do not show a soundness of intellect on some occasions. That madness consists in reasoning well on false premises, is a definition sanctioned by high authority ; but it seems to me, that in order to apply this doctrine, we must be previously acquainted with the character and external circumstances of the man. Fox and Pitt both reasoned well, and on the same premises, yet we accuse neither of madness, though each drew a different inference. If interest should be suspected to have warped either, the same cannot be thought of Clarke and Leibnitz.

If I were to venture a definition of Madness, I should call it a reverie from which a person cannot be recovered. It will then be asked, What is a reverie ? To this, the general answer is, A waking dream ! What then is a dream ? If I must give an answer, I should say, That state of the body and mind, in which imagination passes for reality, the senses being at that time so torpid, as to require an unusually strong stimulus to produce any impression. The mind, during sleep, seems to have no power of arrangement or combination ; but from its activity, recalls certain impressions, in proportion as the torpid state of the animal is less complete. In a reverie, the mind is so entirely engaged in a single subject, that external objects

exposed to the organs of the senses, produce no impression whatever; or if any, those impressions are immediately associated with the subject in which the mind is engaged. In either of these conditions, a strong stimulus applied to the senses, brings the person to the clear perception of all the objects around him; the dream is found to have been a fallacy; and the train of thoughts during the reverie being now disturbed, external objects produce their full impression.

In madness, the organs of the senses still retain their capacity for impression, but no stimulus, however powerful, is sufficient to lessen the illusion under which the mind labours.

After all, it may be difficult to distinguish such a state of mind from misguided enthusiasm; if then, we require a definition which will include every shade, there seems no objection to the proposition offered above, That madness is a reverie from which a person cannot be recovered.

NOTE 14, Page 27.—“For this purpose, the hereditary peculiarity should always be kept in view, in the direction of the early studies, in the subsequent employment, &c.”

This attention should not be confined to those in whom an hereditary susceptibility is suspected. For, as it has been frequently hinted, wherever disease exists, there must have been susceptibility to that disease, whether it existed in the parents or not: the same regard, therefore, is necessary in the management of all young subjects, in whom we see strong

marks of character at an early period of life. The dangerous age with such is somewhat beyond that of puberty, when they first find themselves exposed to the busy world; and from the attention they receive, at that interesting age, feel as if the eyes of all their acquaintance were directed towards them. In proportion to the delicacy of their feelings, and often to the strictness of their education, they become more sensibly alive to every impression. Perhaps this may be entering on the subject of education, which I shall leave to others. Those, however, who have paid the best attention to it, must have remarked, that though one general system may be sufficient, as there is a general similarity in the human character; yet the plan should be varied, wherever we see any striking peculiarities in the progress of intellect, or the impulse of passion. The variety of character is so great, that it would be impossible to prescribe rules for all; but in our endeavours to repress forwardness, or give courage to timidity, we shall gain no permanent advantage, without a strict adherence to truth.

It will be a vain attempt to undervalue the attainments of the early genius, or to over-rate the proficiency of the dull: each will be sensible to his own standard; and the only mode of checking the one, or encouraging the other, must be to remind each, that there is the same variety in the period at which the mind expands, as in that in which the growth of the body increases. Emulation, so much talked of, excepting where we can measure the capacities of the individuals, or have reason to suspect indolence in either, should rather be repressed than encouraged, as it is

more frequently the parent of bad passions than of amiable affections.

But it is the nearer approach to perfect manhood that we have most to apprehend. The character, as well as the constitution, is then assuming a more permanent form, and must be watched, in both sexes, with a degree of delicacy which cannot be defined, as it depends so much on the variety of character and the influence of early impressions.

NOTE 15, Page 28.—“ *The more advanced climacterics in both sexes.*”

Diseases excited during the changes about the age of puberty are, for the most part, temporary. I have known even hereditary madness arise from this cause, and cease as the change was completed, without returning for a long series of years; probably, the whole of life. But in the succeeding climacteric, the completion of manhood, the access of disease is usually attended with more permanent consequences. Madness, the most incurable, and with the fewest lucid intervals, sometimes originates at that age. Mr. Haslam has some very ingenious remarks on this subject.\*

I have not sufficient experience, to say whether madness occurring at this age, if attended to as soon as suspected, could be cured. But, by the success I have met with in the early stages of epilepsy, under similar circumstances, I cannot help again urging the importance of watching the slightest alteration of character at that critical age.

\* Treatise on Madness, p. 64 and 203.

NOTE 16, Page 29.—“ Before Dr. Heberden had given a name to that species of *Asthma*.”

Angina Pectoris, for which I know no better English name than spasmodic asthma, is the disease which afflicted Mr. Hunter the last twenty years of his life; and, as he himself remarks, arises from a variety of causes. It was first distinguished from other forms of asthma, in a paper published by Dr. Heberden in the 22d vol. of the Medical Transactions, in the year 1772. The author speaks of it as not extremely rare, though he does not recollect the mention of it by any other medical writer. I suspect, however, that it was noticed by the artless, though expressive term, “ rising of the lights;” a term still retained in the Bills of Mortality, though no numbers have lately been affixed to it. Is it not extraordinary, that in the present state of London, so little attention is paid to this important branch of police? In the “Inquiry” before alluded to, were inserted some proposals for reforming these registers. With this work was circulated a specimen of our weekly Bills in their present state, and the following address;

“ Without correct Registers, every attempt at preserving the public or individuals from EPIDEMIC DISEASES must be formed on insufficient data. It has even been suspected, that the means adopted have, in some places, proved worse than unequal to the end; that subjects in previous health, sent from ship-board to Lazaretros, have perished by despondency and unwholesome air.

“ A sense of duty, strengthened by the suggestions of a character distinguished for science, urbanity, and political knowledge, has induced the

" author to collect such particulars as come within the  
 " province of a physician, concerning diseases usually  
 " considered contagious. These INQUIRIES have  
 " been prosecuted among documents, which, however  
 " uncertain, are all that the utmost industry could  
 " procure. They are sufficient to show, that without  
 " more authentic records and a general co-operation,  
 " every future, like every preceding alarm, must be-  
 " come a subject of terror and controversy instead of  
 " well-directed caution.

" A weekly bill of mortality for London is enclosed  
 " as a specimen. It differs from the others only in  
 " the numbers annexed to each article. They all a-  
 " gree, among other absurdities, in distinguishing  
 " scarlet fever from scarlatina: and though the mor-  
 " tality from that disease has been for some years past  
 " so frequent and so notorious, no number is ever af-  
 " fixed to either article. Such are the records fur-  
 " nished by the largest and wealthiest city in Europe!  
 " The Inquiry is submitted to the consideration  
 " of those who have the means of acquiring political  
 " knowledge on these subjects. If, on perusal, more  
 " medical information should be expected, the author  
 " will endeavour to improve every hint with which he  
 " is honoured. At the same time, it cannot be neces-  
 " sary to express his wish, that Gentlemen of suffi-  
 " cient leisure, and some influence, would turn their  
 " attention to securing such registers as may form the  
 " basis of future, more extended, and more accurate  
 " Investigations."

These were presented to many distinguished pub-  
 lic characters, some of them in office and others at  
 leisure; many were waited on personally, but the re-

gisters remain as before, excepting that scarlatina and scarlet fever are now both omitted, which, if there should be no other documents, may lead future ages to suppose, that scarlet fever was suspended for a certain number of years in this city. Mr. Rose has since introduced his Register bill, which I doubt not may be very useful for statistical purposes, and perhaps, may gradually lead to a discrimination of the various diseases. Should this ever be accomplished, it would prove, by extending over the whole kingdom, an important source of improvement to our medical knowledge. But to return to angina pectoris, as a climacteric disease.

Mr. Hunter was 45 years old when he was first attacked; Dr. Heberden remarks, that most of the cases he saw, were above 50 years of age. The case which makes the first article in the 3d vol. of Medical Transactions, is related by the patient himself. He informs Dr. Heberden, that he is 52 years of age, and as far as he can recollect, had been troubled with the complaint five or six years; probably, some years might have elapsed, before Dr. Heberden was consulted in the other cases. If so, it will appear that the age mentioned in the text is the most frequent for the first attacks of angina pectoris. In Mr. Hunter, the first attack was preceded by acute symptoms, and I have suspected the same in other cases which have fallen under my own observation. Though most people pass this critical period of life without any alarming symptoms in the constitution, yet it ought always to be attended to, and most of all, where there is reason to suspect any family or hereditary predisposition. Sometimes, the change is ushered in by a tedi-

ous hectic, which will continue, with few intermissions, for more than a twelvemonth, during which the friends of the patient will feel serious apprehensions for the event. On a sudden, symptoms of recovery appear, and advance with such rapidity, that the person is congratulated by his friends on having taken a new lease of his life, an expression which, though figurative, is almost admissible, on account of the increased health and vigour which often attend the completion of this change in the constitution.

NOTE 17, Page 33.—“ *By these means a race is gradually reared with constitutions best calculated for the climate: a law which, I suspect, has been too much overlooked, in our inquiries after the causes of the more marked varieties in the human species.*”

The last vol. of the Philosophical Transactions contains a very full and ingenious dissertation on this subject, by Dr. Wright. It cannot be necessary, if the reader is satisfied with the attention that has been paid to the work before him, to hint, that though Dr. Wright's paper appeared earlier than the present publication; yet, that this part of the question had not been overlooked by the author. It is well known, that the influence of the sun is not sufficient to produce a permanent change in the complexion of the human integuments; yet, it must be admitted, that the shining black skin is best calculated to repel radiant heat, and the woolly hair to protect the contents of the skull from a vertical sun. There is not, however, a sufficient uniformity in these peculiarities, according to heat or equatorial situation; but in all the inhabitants of warm climates, we find a capacity to

generate cold, greater than in the natives of colder regions or their immediate descendants; nor does this arise, as once suspected, from mere evaporation by perspiration, for the skin of the native of the South is dryer than that of the North under the same temperature.

I have somewhere met with a remark on the capacity of the Greenlanders to generate heat. The author took his observation from the suffocating heat he experienced in one of their chapels. These properties may be imputed to habit, but I very much suspect, that they arise more from peculiarities of constitution, increased and perpetuated by the intermarriage of couples who, through this constitutional peculiarity, were enabled to survive those, that from the want of it became victims to the climate. In a conversation I had with Sir J. Banks, he reminded me, that in their well known tour towards the South Pole, all were able to resist the intense cold, excepting two negroes, the only black men of their party. We find in England, individuals, and even families, impatient of cold, and others equally affected by heat. This variety we might expect, from the inconstancy of our climate, and our artificial mode of living; by which, provision is made against each. But disease, where the cause is constantly present, is not so easily escaped, as the inconvenience of temporary sensation. It has been thought, that habit might be sufficient to enable the constitution to withstand change of climate; an experiment was tried, by removing a regiment to the West Indies who had passed a summer in Madeira, but the mortality was as great as in troops removed immediately from Great Britain.

We are not to suppose, that the inhabitants of the South are entirely free from those fevers so destructive to emigrants from the North. The negroes in the West Indies, the natives of Africa and of the East Indies, feel the effects of periodical miasmata, as some inhabitants of colder regions suffer by scrofula; but neither of them in any degree proportionate to what is felt by emigrants from one climate to another. Having mentioned the word Scrofula, after professing to avoid all technical expressions, I might perhaps excuse myself, by saying, that the word is sufficiently vernacularized; but unless it were as well understood, this would scarcely be a sufficient apology. The learned may require an etymology; this would be extremely difficult, in a word, the orthography of which is not well ascertained, some spelling it with the f, and others with the ph. The former derive the term from *Scrofa*, the Latin word for a sow that has frequently littered. Even here there is a doubt, concerning the application of the etymology, some ascribing it to the frequency with which pigs are affected, and others to the multiplication of certain tumors, similar to a large litter of pigs. Most authors say, that it is a disease of the glands of a particular species; yet, parts are often said to be affected by it, in which none of these glands are discovered, as the bones, the lungs and membranes of the eyes and nose. It is said to be hereditary, but is only so in predisposition, always requiring some exciting cause. These causes are all of them such as produce a disposition to local disease, and lessen the restorative powers of the constitution or of the diseased part. The most gene-

ral of these is cold. Hence it has been remarked, that among the inhabitants of the colder parts of our island, there are few families who are not scrofulous; but this is only saying, that the exciting cause is constant among them, that therefore no individual of any family can entirely escape, who has the slightest predisposition to it. The truth is, that the inhabitants of warm climates are much more predisposed to scrofula, as is proved by the effect produced on them when exposed to the cause. Negroes in cold climates rarely escape; and the children sent by their parents from the South for education, often suffer the effects of a disease never before seen by the family.

Cold, however, is not the only exciting cause. Poor diet, bad clothing, and all the other attendants of poverty, or privations from any other cause in the most favourable climate, will produce a similar effect, but less aggravated than when increased by the continual operation of cold. The late Dr. Heberden, whom I so often mention, and always with pleasure, speaks of the unwholesomeness of diet or situation as an exciting cause. The inhabitants of Rheims are said to have been very much afflicted with scrofula, when they used no other water but from their wells; and to have been relieved by the introduction of the water of a neighbouring river. Is it not highly probable, that the meliorated condition of the inhabitants which enabled them to afford the expence of such aqueducts, might also, by proving the means of better diet, clothing, and lodging, have contributed to their exemption from scrofula? Every community, as it is poor, is subject to cutaneous and other local diseases, which are ill-conditioned and inveterate, in proportion

as the means of relief are less in their power. It is universally admitted in Great Britain, that the inhabitants are more free from these complaints; as they are become richer. But the uncertainty of our climate will always expose those who have a strong susceptibility, because we never can be sufficiently prepared for changes of temperature, like the inhabitants of more settled, though colder regions.

Scrofula is very well described by the common expression of bad flesh to heal, so that any one may become scrofulous by a low state of health, induced from any cause; but some constitutions, in every state of health, shew a less aptitude for healing wounds than others. If, in these subjects, inflammation is excited in any part, there will be always danger of consequent abscess, and the healing process will be slow. In young subjects, the glands are the most liable to inflammation; probably, on account of their increased action at the period of growth, in order to model the form to its various changes. Hence, the glands of the neck, by their exposure to cold, are the most liable to become scrofulous. Though the consequent scars, from their unsightliness, are usually considered as the strongest proofs of a scrofulous constitution; yet, as the causes which induced the inflammation of those glands have ceased, there is no reason to apprehend any subsequent symptoms, without the access of some external cause. White swellings, and a variety of other complaints, are very properly enumerated as scrofulous, yet they more frequently appear in those who have escaped the early symptoms. The terror of scrofula is much increased by its sometimes affecting the lungs; but the most frequent

form of consumption, we have already seen, is neither hereditary, nor connected with scrofula. In the same manner, the delicate skin and high complexion are often described as marks of a scrofulous constitution; but the fallacy of this is proved, by the frequency with which the disease attacks emigrants from the southern regions. The high complexion is, in this country, the usual attendant on the family consumption, and marks an irritability very easily affected by external causes; it differs, however, from scrofula, inasmuch as the ulcers rarely become indolent.

On the whole, then, I should define scrofula to be that constitution, in which local disease is excited by the slightest causes, and in which the restorative power is the most feeble: admitting that such a constitutional predisposition, like every other, is often hereditary; but that the disease itself may, for the most part, be prevented or cured, by avoiding the exciting cause.

NOTE 18, Page 33 and 34.—“*Sir John Seabright and Colonel Humphreys.*”

In the conclusions drawn from the philosophical experiments of these gentlemen, we may remark, that the progress of Nature is interrupted in both, though most in those of Colonel Humphreys: in both, the animals were prevented from ranging at large. There is a prevailing opinion, that the families in many animals degenerate by breeding *in and in*, even when the males are selected by art. I am not sufficiently acquainted with comparative physiology, to offer any opinion on this subject. From the inquiries I have made of those who have attended to

the breed of dogs, such would appear to be the case in that race. I have even heard it asserted, that the females, when in heat, show a preference in the choice of their mates; but many and accurate experiments are necessary to ascertain these questions.

A very attentive practical shepherd, with whom I had frequent opportunities of conversing, informed me, that though he selected the best rams, yet he could not always depend on the issue. Some, after a succession of good lambs for two or three years, would, without any apparent changes in themselves, become the parents of an inferior offspring, insomuch that he thought it necessary to part with them immediately, in order to prevent the deterioration of his flock. It is right that this subject should be well understood, and I sincerely hope we shall, by degrees, receive satisfactory information from philosophical and practical breeders. But after all, we must be extremely cautious, how we apply to one race of animals, the laws we have detected in another. We should also recollect, that in a state of Nature, the law of the strongest must prove a constant check against the deterioration of the race in the less complicated animals; and that, under the protection of man, they will be artificially coupled, whilst the progress of refinement in himself will necessarily tend, by a variety of means, to the same end.

NOTE 19, Page 34. — “ *Many endemic peculiarities found in certain sequestered districts, which have been imputed to the water and other localities.*”

The prevalence of certain diseases in particular districts, has always been an object of inquiry. Hip-

pocrates ascribes many of them to the water and air of the places. This opinion has prevailed ever since his time. The improvements of modern chemistry, by a more accurate analysis of these waters, have taught us the insufficiency of many of these opinions; but we remain as much as ever in doubt, as to the real causes. The prevalence of calculous complaints in some provinces of France, was a matter of inquiry among the learned societies in that kingdom; and at different times, imputed to the wine, the beer, and the water. A comparison between the different districts evinced the fallacy of all these conclusions. That calculous, as well as most other complaints, are hereditary, I shall offer one satisfactory proof. Mr. Ferreira, an ingenious surgeon from Sicily, did me the honor to attend a course of my lectures. After having attentively listened to my remarks on hereditary diseases, he asked me, Why I had not included calculus among them? This led to a conversation, during which, I discovered the great advantage he possessed, in tracing these hereditary properties in the human race, from the great caution with which the Sicilian nobility preserve the purity of their blood, by continual intermarriages, each in their own family. This is carried so far, that one family in which elephantiasis is hereditary, disdains an alliance with any other, on account of their own elevated rank.

I cannot help suspecting, that it will hereafter be found, that goitre and cretinism are endemial in certain districts, from no other cause than this hereditary property. M. Gautier, who has written a long account of goitre, assures us, that it is not hereditary; yet, he afterwards adds, "the first circumstance no-

ticed, is a weak constitution derived from parents, which may contribute to give a predisposition to the disease." A general opinion prevails, that goître is principally confined to mountainous situations; yet no one pretends to say, that every mountainous situation produces goître.

Dr. Barton, Professor of *Materia Medica, &c.* in Pennsylvania, enumerates the various causes assigned for this disease. These are principally impregnation of the waters with calcareous and other matters, exposure to cold and drinking cold water, insects inhabiting the water, unwholesome food, and a residence in confined vallies. Dr. Barton easily shews the insufficiency of such causes, and concludes, with imputing the disease to those exhalations of marsh miasmata which induce the intermittent fever. But surely, there is the same want of uniformity between cause and effect in this as in all the other instances. Though the Professor has no view to any hereditary properties, yet he mentions a family, consisting of father, mother, and four or five children, all afflicted with the goître; and in his description of the places, in which the disease is found, seems to speak of it in one part, as confined to the Indian families, and in another, in which it is wholly restricted to the Canadians; meaning, I presume, the Colonists. In that part of Kent which borders on Sussex, and also in the adjoining parts of the latter county, the swelled throat is extremely common, and rarely confined to a single person in the same family. Whether there could be traced any alliance in these different families, it would be very difficult to ascertain, as the disease is principally confined to the females, who change their names

on marriage, and also to the lower class, whose family connections are not so easily traced. I admit there are difficulties in the way, if, as is said by some, the inferior animals are sometimes affected; I have not, however, heard that such is the case in Derbyshire, or any other part of England. At all events, we must admit, that if the disease is excited by any local causes, the predisposition to such excitement is hereditary.

I have never been able to learn, that ideotcy is associated with the swelled throat, any where but in the Alps; and some authors, who have given us an account of the diseases of those parts, assure us, that the union of the two is by no means universal: we cannot suppose that one cause should produce two such effects, and it is well ascertained, that ideotcy is hereditary in all its stages. Of this, Haller gives a striking instance from his own knowledge, "Ex duabus patriciis sororibus ob divitias maritos nactis cum tamen fatuis essent proximæ, novimus in nobilissimas gentes nunc a seculo retro ejus morbi manasse seminia ut etiam in quarta generatione quintave omnium posterorum aliqui fatui subsint."\* — May we not then impute its general prevalence in that secluded spot, to the accidental settlement of a family in which it was hereditary to produce ideots, and to the frequent intermarriages of their descendants, which was very likely to happen, where poverty and the wildness of the country would prevent migration from, or colonization among them? It is true, that no person who has made observation

\* Haller, l. c.

on the spot, as far as my reading has extended, has taken this view of the question; but most of them visited those places under previous impressions, and all of them speak of numbers in the same family afflicted with these diseases. I have attempted a correspondence with an eminent surgeon in that part of Italy, but the unsettled state of the continent has hitherto prevented me from receiving any information.

NOTE 21, Page 38.—“ *A disease which arrests the progress to virility of every youth, and emasculates every adult.*”

The reader will recollect the importance which, in the Dissertation, is attached to the above fact. But this is not all; in another place it was remarked, that contrary to the testimony of two thousand years, I had ventured a prognosis concerning the Lazars, which examination afterwards confirmed. It will not, therefore, be thought unreasonable, if I claim some attention in resolving a doubt which may seem to implicate either my own veracity, or the accuracy of four gentlemen who visited the Lazaretto with me, the fidelity of two artists, who drew the full length portraits of two naked Lazars, and the testimony of two subsequent witnesses. A passage has been shown me in Dr. Bateman's Synopsis, which a friend assured me, on its first perusal, left an impression on his mind unfavorable to my accuracy. His partiality induced him to examine several times over before he could feel himself at all reconciled. This is an indulgence that cannot be expected from the general read-

er. As Dr. Bateman acknowledges he has never seen Elephantiasis, I shall pass over his description, and insert only the following paragraphs.

“Aretæus and the ancients in general consider Elephantiasis as an universal *cancer* of the body, and speak of it with terror: they depict its hideous and loathsome character, its contagious qualities, and its unyielding and fatal tendency, in strong metaphorical language, which, indeed, tends to throw some doubt on the fidelity of their description. The very appropriation of the name is poetical; and Aretæus has absurdly enough prefixed to his description of the disease an account of the elephant, in order to point out the analogy between the formidable power of the beast, and of the disease. It is probable, that his terrors led him to adopt the popular opinion respecting the malady, without the correction of personal observation: for, although his account has been copied by subsequent writers,\* and the same popular opinions have been constantly entertained, there is much reason to believe, that some of the prominent features of his portrait are incorrectly drawn.

“Notwithstanding the care with which the separation and seclusion of lepers have been enforced, in compliance with the ancient opinion, there is great reason to believe, that Elephantiasis is *not contagious*.

\* “It is impossible to read the description of this disease, (as said to occur at Barbadoes) by the learned Dr. Hillary, without a conviction that that respectable physician had in his mind the history detailed by the eloquent Greek (Aretæus), and not the phenomena of the disease, as he had himself seen it. See his *Obs. on the Air and Dis. of the Island of Barbadoes*, p. 322, second edit.”

M. Vidal, long ago, controverted that opinion, having never observed an instance of its communication from a leprous man to his wife, or vice versâ,\* altho' cohabiting for a long series of years. Dr. T. Heberden daily observed many examples of the same fact in Madeira, and affirms, that he never heard of any one who contracted the distemper by contact of a leper. And Dr. Adams has more recently given his testimony to the same truth, remarking, that none of the nurses in the Lazar-house at Funchall have shown any symptoms of the disease; and that individual Lazars have remained for years at home, without infecting any part of their family.†

"With respect to the *libido inexplebilis*, which is said to be one of the characteristics of Elephantiasis, the evidence is not so satisfactory. Its existence, however, is affirmed by most of the modern writers, with the exception of Dr. Adams. M. M. Vidal and Joannis mention it among the symptoms of the dis-

\* "See his Recherches et Obs. sur la Lepre de Martigues, in the Mem. de la Soc. Roy. de Med. tom. i. p. 169.—Dr. Joannis, a physician at Aix, who investigated the disease in the Lazar-house at Martigues, in 1755, also asserts the rarity of its communication between married persons. See Lond. Med. Obs. and Inquiries, vol. i. p. 204.—Indeed, several able physicians, two centuries before, though bending under the authority of ancient opinion, yet acknowledged their astonishment at the daily commerce of lazars with the healthy, without any communication of the disease. See Fernel, de Morb. Occult. lib. i. c. 12. Forest. Obs. Chirurg. lib. iv. obs. 7: also the Works of Fabricius, Plater, &c. Fernel, indeed, admits, that he never saw an instance which proved the existence of contagion."

† "See his Obs. on Morbid Poisons, 2d edit. c. 18."